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From:

LINDA A. SCARCELLI

Account Name , CNL FINANCIAL GROUP, INC.

Account Number :

113615003626

Phone

(407)650-1000

Fax Number

(407)540-2699

LLC DISS/WITH OR REV DISS

INSURANCE PARTNERSHIP MANAGER #1, LLC

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September 17, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LINDA A. SCARCELLI CNL FINANCIAL GROUP, INC.

SUBJECT: INSURANCE PARTNERSHIP MANAGER #1, LLC

REF: 199000002780

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SECRETAIN OF STATE

TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Or L990000278	ganization were filed on 5/13/99	and	assigned document	number
3. The date the dissol	aution was approved: 9/10/07	·	· 13	
	courrence that resulted in the limited liability tatutes, (copy 608.441 on back cover letter).	company's dissolut	ion pursuant to service	HISION SECRE
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